



PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. **10/623,051** Confirmation No.: 3961  
Applicant(s): **GUNTHER MICHAEL, ET AL.**  
Filed: **JULY 18, 2003**  
TC/A.U. **TBA**  
Examiner: **TBA**  
Title: **HYDROPHOBIC SILICA**  
  
Docket No.: **032301.0901**  
Customer No.: **25461**

**MAIL STOP NONFEE AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Sirs:

**SECOND PRELIMINARY AMENDMENT**

Before the first Official Action, please amend the above-identified application as follows:

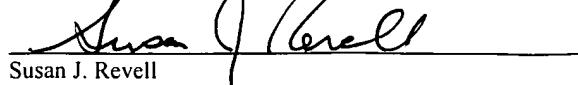
**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.

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\_\_\_\_\_  
Susan J. Revell



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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

		Application Number	10/623,051
		Filing Date	07/18/2003
		First Named Inventor	GUNTHER MICHAEL
		Art Unit	1714
		Examiner Name	To Be Assigned
Total Number of Pages in This Submission		Attorney Docket Number	032301.0901

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Attachment: "Schriftenreihe Pigmente Nr. 11";Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Robert G. Weilacher, Reg. No. 20,531
Signature	
Date	March 9, 2004

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Typed or printed name	Susan J. Revell
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Date	March 9, 2004

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